

SCHEDULE G-3

ARIZONA DEPARTMENT OF WATER RESOURCES

ELECTRICAL POWER OPERATIONS ANNUAL REPORT 2004

Facility Name: _____

Facility No.: _____

Facility Owner : _____

Contact Name: _____

Contact Address: _____

Contact Phone: _____

Rights Used at Facility:

If you received an annual use letter from an irrigation district or municipal provider, please submit a copy of their letter with your 2004 Annual Water Withdrawal and Use Report to validate deliveries received.

Pursuant to Chapter 6 of the Third Management Plan of your Active Management Area, all electric power operations are required to supply the following information. Please complete one form per electrical power plant. Instructions are listed on the reverse side of this form.

PART 1 - FACILITY TOWER INFORMATION

Tower #	Date of Construction	Cooling Capacity (tons)

Tower #	Date of Modification	Cooling Capacity (tons)

PART 2 - INDIVIDUAL TOWERS

Tower	Avg Cycles of concentration	Non-Exempt Y/N	Blowdown produced (acre-feet)	Blowdown TDS (ppm)	Makeup TDS (ppm)	Type of Water	Percent of Effluent use

PART 3 - FACILITY INFORMATION

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Power Generated													
Fully operational use periods (days/mo)													

PART 4 - ALL WATER RECIEVED

Amount of water	Metered		Type of Water	Purpose
	Yes	No		

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INSTRUCTIONS - ELECTRICAL POWER OPERATIONS

Note: If any information pre-printed on this form is incorrect, please make the needed corrections.
For any information not already pre-printed on this form, please follow the directions below.

Enter Facility Name, Owner Name, Contact Person Name, Contact Address and Phone Number if not already shown.

PART 1 - FACILITY TOWER INFORMATION

List each tower number located at your facility, the dates of their construction and/or modification to the tower cooling capacity and their total cooling capacity in tons. Additional sheets may be submitted if needed.

PART 2 - INDIVIDUAL TOWERS

Please provide the average cycles of concentration. If the tower is non-exempt enter the blowdown produced in acre-feet. Provide in parts per million (ppm) the total dissolved solids (TDS) of blowdown and make-up waters. Include the source of water for the make-up and the percent, if any, of effluent used in the make-up water.

PART 3 - FACILITY INFORMATION

For each month of calendar year 2004, please indicate total power generated in megawatt hours, the months or partial months that your facility was fully operational and the months or partial months your facility was not generating any electricity.

PART 4 - ALL WATER RECEIVED

Please provide the total quantity of water from any source, including effluent, that was used for all purposes at the power generation plant. Enter quantity in acre-feet.

*** Water use records should be maintained for a minimum of three (3) years.

Please contact your local Active Management Area if you need assistance completing this form.

PHOENIX AMA (602) 417-2465 PINAL AMA (520) 836-4857 SANTA CRUZ AMA (520) 761-1814
PRESCOTT AMA (928) 778-7202 TUCSON AMA (520) 770-3800